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|---|---|-------------------------------|---|--|--------------------------------|
| SERIAL NUMBER 09/589,626 | FILING OR 371(c) DATE 06/07/2000 RULE | CLASS 623 | GROUP ART UNIT 3738 | ATTORNEY DOCKET NO. PRES06-00147 | |
| APPLICANTS Ronald A. Schachar, Dallas, TX; | | | | | |
| ** CONTINUING DATA ***** This appln claims benefit of 60/138,105 06/07/1999 <i>OK per 10-22-07</i> | | | | | |
| ** FOREIGN APPLICATIONS ***** <i>NONE per 10-22-07</i> | | | | | |
| IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 08/01/2000 | | | | | |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met <i>Allowances</i> Verified and Acknowledged <i>[Signature]</i> Examiner's Signature Initials | | STATE OR COUNTRY TX | SHEETS DRAWING 3 | TOTAL CLAIMS 21 | INDEPENDENT CLAIMS 2 |
| ADDRESS NOVAKOV, DAVIS & MUNCK, P.C. 900 THREE GALLERIA TOWER 13155 NOEL ROAD DALLAS, TX 75240 | | | | | |
| TITLE Scleral prosthesis for treatment of presbyopia and other eye disorders | | | | | |
| FILING FEE RECEIVED 2442 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit | | |